

Ward Community Cohesion Fund Proposal Form

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Please read the Guide to the Ward Community Cohesion Fund before you fill in this form

Then complete Section 1: Budget Proposal.

If you are proposing to deliver the project yourself, please complete Section 2: Delivery agency as well. We can help you with this or do it for you – see who to contact in the Guide to the Ward Community Cohesion Fund.

Continue or separate sheets if you need to, or expand the boxes if you are filling in the form electronically.

LEICESTER CITY COUNCIL

23 FEB 2010

Section 1: Budget Proposal

RECEIVED

MEMBERS SUPPORT

1. Name of Ward

STONEYGATE

2. Title of proposal

AND ROOF GARDEN
PLAYGROUND IMPROVEMENTS

3. Name of group or person making the proposal

MEDWAY COMMUNITY PRIMARY SCHOOL

4. Short description of proposal. Please include information on **how the money will be spent, who will benefit, when they will benefit, and how we will know when the proposal has been successful.**

It is important that your answer to this question is clear, because we will only pay the costs when we can see evidence that the outcomes you describe here have been achieved. You can provide further details in your supporting information if you want to.

WE WOULD LIKE TO IMPROVE THE PLAY AREAS USED BY OUR CHILDREN. ONE OF THESE AREAS, THE "ADVENTURE PLAYGROUND" IS ALSO USED BY THE GENERAL PUBLIC WHEN THE SCHOOL IS SHUT - eg AT WEEKENDS + DURING THE EVENING. WE WANT TO EXTEND THE RANGE OF ACTIVITIES AVAILABLE, FOR EXAMPLE PAINT GRIDS ON THE GROUND FOR GAMES, BUYING NEW EQUIPMENT, REFURBISHING + REPAIRING TO MAKE OUR PLAY AREAS MORE ATTRACTIVE. WE ALSO HAVE A ROOF GARDEN THAT NEEDS RE PLANTING + EQUIPPING WITH GAMES AND STORAGE/PLAY AREAS. WE ARE VERY MUCH AT THE

PLANNING STAGE, GATHERING IDEAS
AND CHILDREN, CONSULTING OUTSIDE
SUCH AS FIRMS THAT PROVIDE PLAY
AND DESIGN PLAY AREAS. AT THE
INDICATION FROM YOU AS TO WHAT
YOU MIGHT BE ABLE TO SUPPLY SOME
BE USEFUL. WHOSE WE HAVE MORE
AND OTHER AGENCIES AS TO WHAT
FINANCIALLY WE CAN BE MORE SPECIFIC
THE MONEY WILL BE SPENT. WE AIM
DURING THIS SCHOOL YEAR IF POSSIBLE
WILL EXTEND UNTIL WE FEEL WE HAVE
USE OF OUR PLAY AREAS + ROOF GARDEN
KNOW THE PROJECT HAS BEEN SUCCESSFUL
SEE THAT THE CHILDREN ARE ENJOYING
ARE BEHAVING BETTER (BECAUSE OF
IN TERMS OF THE ROOF GARDEN, I
THE PROJECT SUCCESSFUL WHEN WE
+ INTERESTING AREA THAT WE CAN
TEACHING AS WELL AS PLAY.

5. Which Ward Community Cohesion Fund criterion or criteria does your proposal support? Please give details of how it does this for each criterion (Add further rows or continue on a separate sheet if needed).

Criterion no.	Details of how your proposal supports the criterion
2a	THE PLAYGROUND IS USED BY OUR CHILDREN + OTHERS FROM THE NEIGHBOURHOOD
3a	PLAY IS AN IMPORTANT PART OF OUR CHILDREN'S EDUCATION, PARTICULARLY THE YOUNGER ONES.

6. Have you provided any supporting information? Tick if yes

7. What is the total cost to the Community Meeting? £

8. How have you estimated or calculated the cost? Please show each item of expenditure and say whether it is an estimate or an actual cost.

Item	Cost £	Estimate or actual cost?
The costs could run into several thousand pounds		
So a contribution would be very welcome.		
Total		

9. Have you tried to get funding for this project from anywhere else, either in the Council or from another organisation? If so, please give details

WE ARE APPLYING FOR A £3000 grant FROM THE TESCO CHARITY TRUST

WE ARE INTENDING TO HAVE FUND RAISING EVENTS SUCH AS A SUMMER FETE.

10. Who proposed the project? Please provide contact details.

Name of contact person	ALISON COTTAM
Your position in organisation or group	TEACHER AT THE SCHOOL
Name of organisation or group	MEDWAY COMMUNITY PRIMARY
Address	ST STEPHENS ROAD, HIGHFIELDS LEICE
Phone number	School 0116 2544811

Section 2: Delivery agency (this could be a single person, group of people or a group or organisation)

11. Who will deliver the project? Please provide contact details.

Name of contact person	MRS ROSE GOSSAGE
Your position in organisation or group	ASSISTANT HEAD KEY STAGE 1
Name of organisation or group	TEACHERS AT MEDWAY COMMUNITY + OTHER STAFF
Address	ST STEPHENS ROAD HIGHFIELDS LEICESTER
Phone number	0116 2544811
Email	

12. Declaration

I have read the *Guide to the Ward Community Cohesion Fund* and I accept the arrangements described in that guide. I confirm that the information I have given on this form is true. I will inform the council immediately if any of the information I have given on the form changes.

Name	A. D. COTTAM.
Signature	ALISON COTTAM
Date	21/2/10

Please send this completed form back to:

Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, LEICESTER, LE1 9BG.
Fax No: 0116 229 8827